DECLARATION OF WRITE-IN CANDIDACY FOR THE PRIMARY ELECTION

l,	am a registered voter residing at:				
I, (Print Name as You are Registered	to Vote)			-	
(Residence	e Address)				
		,	Washington	1	
(City)	(County	·/)	wasiiiigtoi	(Zip Code)	
and at the time of filing this declaration, I am	n legally qualified	d to assume	office if ele	cted.	
I hereby declare myself as a write-in candida	ate for the office	of:			
(Na	ame of Office)				
(Congressional or Legislativ	ve District, Coun	ty, City or O	ther Jurisdi	ction)	
(Position No. if Applicable)	(D	irector or Co	mmissione	District, if Any)	
For the following term of office: A full term or a full term and a short An unexpired term	term, or				
At the primary election in September, 20	·				
This office is: ☐ Nonpartisan, or ☐ Partisan, and I am: a candidate of the				party, or	
☐ An independent candidate.				party, or	
Filing Fee: There is no filing fee because the of I am submitting a filing fee of \$ I am without sufficient assets or incomplifing fee petition in lieu of this fee, p	, an ome to pay the f	amount equalisms	al to 1% of tuiling all to 1% of the substitution of the substitut		
wear, or affirm, that this information is, to the pport the Constitution and the laws of the Unitashington.					
ote : Your signature must be personally 8. tnessed by either a notary public or by e officer with whom the declaration is filed.	Sign Here → _	(Signature o	f Candidate	e as Registered to Vot	
bscribed and sworn before me this	day of			20	
(Signature of Acknowledging Official)		/Title	of Acknowle	daina Official)	